	Docket No : BEE-0001 RPB REF: BEE-0001
	Art Unit: UNASSIGNED
	Examiner: UNASSIGNED
Pling Date, HEREWITH	

Title: AUTOMATED IMAGE IDENTIFICATION SYSTEM

# Declaration for Patent Application and Appointment of Attorney

As a below-named inventor, I hereby declare that my residence, post office address and citizenship are as stated below next to my name; I believe that I am the original, first and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention (Design, if applicable) entitled above, the specification of which is either attached hereto, or was filed on the date listed above as with the Application Serial Number listed above (whichever is applicable).

### REVIEWED AND UNDERSTOOD CLAUSE

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment(s). I acknowledge the duty to disclose information which is material to the examination of this application in accordance with *Title 37, Code of Federal Regulations*, § 1.56(a).

### DOMESTIC PRIORITY CLAIM

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or PCT international application(s) designating The United States of America listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filling date of the prior application(s) and the national or PCT international filling date of this application:

APPLICATION NUMBER	FILING DATE	STATUS (Patented, Pending, Abandoned)
N/A	N/A	N/A

## WILLFUL FALSE STATEMENTS CLAUSE

I horoby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine, or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

### CORRESPONDENCE ADDRESS

Send all correspondence to:

Robert Platt Bell Registered Patent Attorney 8033 Washington Road Atexandria, VA 22308 Telephone Calls to:

(703) 768-0340

FAX: (703) 768-0650

### POWER OF ATTORNEY

I (We) hereby appoint as my (our) attorneys, with full powers of substitution and revocation, to prosecute this application and transact all business in the Patent and Trademark Office connected therewith the following registered Patent Attorneys: Robert P. Bell, Reg. No. 34,546; Robert G. Lev, Reg. No. 30,280

Citizenship: United Kingdom  Post Office Address Street: 11 Edmonds Court  City. Didcot Oxfordshire			
		State or Country. United Kingdom	Zip: 0X118QY
		SIGNATURE	
	Post Office Address Street: 11 Edmonds Co City. Didcot Oxfordshire State or Country. United Kingdom		

work/forms/polapplicat/declarat/decl-poa so/